The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED CLAIMS REMAINING HIGHEST # NUMBER EXTRA RATE FEE TOTAL CLAIMS 20 - 20 = 0 x \$18.00 INDEP. CLAIMS 2 - 3 = 0 x \$86.00 Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT No additional fee is required for amendment. Please charge Deposit Account No. in the amount of	
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□ A check in the amount of to cover the filling fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2041 □ Any additional filling fees required under 37 C.F.R. 1.16. □ Any patent application of occessing fees under 37 CFR 1.17. Dated: 4-26-04 Michael E. Whitham	
Reg. # 32,635 Whitham, Curtis & Christofferson P.C. 11491 Sunset Hills Road Suite 340 Reston, Va. 20190 703-787-9400 Customer # 30743 Signature of Person Mailing Correspondence Typed or Printed Name of Person Mailing Correspondence	e as first to the